

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

**10/523581**  
APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1					51						
2		1					52						
3		12					53						
4		21					54						
5		12					55						
6		21					56						
7		12					57						
8		21					58						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	12	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	13						TOTAL CLAIMS						

PTO-1360 (REV. 9/03)

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